

BOX ITEM

WA Health Department of the District of Columbia  
32  
AD6  
9C6

**WITHDRAWN**

from

**LIBRARY**

**NATIONAL INSTITUTES OF HEALTH  
LAWS AND REGULATIONS**

FOR THE

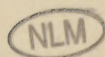
PREVENTION OF

**Scarlet Fever, Diphtheria, Measles,  
Whooping Cough, Chicken Pox,  
Epidemic Cerebro-Spinal Men-  
ingitis, and Typhoid Fever**

In the District of Columbia  
"

PLEASE PRESERVE THIS PAMPHLET  
FOR FUTURE REFERENCE.

FEB 1 8 1960



65/28/59  
G-  
AN ACT for the prevention of scarlet fever, diphtheria, measles, whooping cough, chicken pox, epidemic cerebo-spinal meningitis, and typhoid fever in the District of Columbia.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,* That every person in charge of any patient in the District of Columbia who is suffering from diphtheria, scarlet fever, measles, whooping cough, chicken pox, epidemic cerebro-spinal meningitis, or typhoid fever, immediately after becoming aware of the existence of such disease, shall send to the health officer of said District a certificate, written in ink, signed by such person, stating the name of the disease, the name, age, sex, and color of the person suffering therefrom, and the school which he or she has attended, if any, and setting forth by street and number, or by other sufficient designation, the location of the house, room, or other place in which said patient can be found. When said patient recovers, or dies, said person in charge, as soon as possible thereafter, shall send to the health officer of said District a certificate, written in ink, certifying to that fact. But no person shall certify knowingly or negligently that any patient has recovered from any disease aforesaid until such patient is in such condition as to be free from danger of communicating the disease from which he is suffering to other persons.

SEC. 2. The term "person in charge of any patient," as used in this Act, shall be held to mean, first, each physician in attendance on, called in to visit, or examining a patient, unless called in to visit or examine the patient solely as a consultant to a physician already in attendance;

second, in the absence or disability of any physician aforesaid, or in event of a default on the part of such physician, the head of the family to which the patient belongs; third, in the absence or disability of such person, or in event of default on the part of the physician aforesaid, the nearest relative or relatives of such patient present on the premises and in attendance on such patient; fourth, in the absence or disability of all persons aforesaid, or in event of default on the part of the physician aforesaid, every person in attendance on such patient. And in the cases of physicians and of persons acting in the capacity of physicians, attending, visiting, or examining any patient suffering from any disease aforesaid shall be prima facie evidence that any person so doing was aware of the nature of such disease.

SEC. 3. That any person who violates or aids or assists in violating any of the provisions of this Act shall be punished, upon conviction thereof, by a fine not exceeding one hundred dollars or by imprisonment for not more than thirty days. Prosecutions under this Act shall be in the police court of the District of Columbia on information signed by the corporation counsel of said District or by one of his assistants.

SEC. 4. That the Commissioners of the District of Columbia be, and they are hereby, authorized to make such regulations as they deem necessary for the prevention of the spread of diphtheria, scarlet fever, measles, whooping cough, chicken pox, epidemic cerebro-spinal meningitis, and typhoid fever, and to affix to such regulations such penalties as in the judgment of said Commissioners are necessary to secure compliance therewith.

SEC. 5. That this Act shall take effect from and

after sixty days after its passage, and from and after the expiration of said period an Act entitled "An Act to prevent the spread of scarlet fever and diphtheria in the District of Columbia," approved December twentieth, eighteen hundred and ninety, and an Act entitled "An Act to require cases of typhoid fever occurring in the District of Columbia to be reported to the health department of said District," approved February fourth, nineteen hundred and two, and all other Acts and parts of Acts contrary to the provisions of this Act, or inconsistent therewith, be, and the same are hereby, repealed; and any money available at the time of said repeal for the execution and enforcement of the Acts named be, and hereby is, made available for the execution and enforcement of the provisions of this Act and of regulations made by authority thereof; but for any act done or omitted in violation of the provisions of either of the Acts named above prior to the repeal of said Acts prosecutions may be instituted, and if already instituted may be continued, in accordance with the provisions of said Acts, notwithstanding that said Act has been repealed for all purposes other than the institution and the continuance of such prosecutions.

Approved, February 9, 1907.

REGULATIONS FOR THE PREVENTION OF THE SPREAD OF SCARLET FEVER, DIPHTHERIA, MEASLES, WHOOPING COUGH, CHICKEN POX, EPIDEMIC CEREBRO-SPINAL MENINGITIS, AND TYPHOID FEVER.

---

ISOLATION OF PATIENT. DISINFECTION.

SEC. 1. It shall be the duty of the person in charge of any patient suffering from scarlet fever, diphtheria, measles, epidemic cerebro-spinal meningitis, or typhoid fever, if said person has power and authority so to do, to adopt each and every of the following precautions to prevent the spread of such disease:

a. To isolate the patient, immediately upon the discovery of the nature of the disease, as thoroughly as is practicable, from all persons who are not suffering from the same disease and who are not necessarily in attendance upon the patient, and to maintain such isolation until the recovery or the death of the patient, except in case of patients suffering from typhoid fever.

b. To disinfect each and every article used by or about the patient and all excreta from the patient, and such other articles, if any, as have been specially exposed to infection, before the removal of such article or excreta from said room or rooms if practicable, and otherwise as soon thereafter as is practicable.

c. To disinfect the room or rooms occupied by the patient, and all articles contained therein,



before said room is again occupied and within three days after the removal, recovery, or death of the patient, unless such disinfection has been done by the health officer, except when the patient has suffered from typhoid fever, in which case disinfection of the sick room shall be compulsory under this section only when ordered by the health officer.

#### QUARANTINE OF PATIENT.

SEC. 2. It shall be unlawful for any person having power and authority to prevent or to permit a patient suffering from diphtheria, scarlet fever, measles, whooping cough, chicken pox, epidemic cerebro-spinal meningitis, or typhoid fever, to do, and for any such patient to do, any of the following things:

- a. To appear upon the public street.
- b. To appear in school, church, store, or place of amusement, or in any other place of public assemblage.
- c. To enter a public conveyance, except a vehicle designated by the health officer for the conveyance generally of persons suffering from minor contagious diseases, or a vehicle designated by the health officer for the conveyance of the particular case.
- d. To go or to be carried from place to place over the public streets without authority from the health officer, except that in case of an emergency, and prior to the reporting of a case, the patient may be moved, under direction of a registered physician, from the place where the case is found to some other place in the District of Columbia suitable for its reception, but in such instances the report cards shall indicate the place

where the case occurred as well as the place to which the patient has been moved.

“*Provided*, That patients suffering from whooping cough may appear upon the public streets, and may go or be carried from place to place over the public streets without special authorization from the health officer, but not at such times and places or in such manner as to expose other persons to infection, and if the patient be under 18 years of age, not unless accompanied by an attendant 18 years or more of age, duly authorized and empowered by the parent or guardian of the patient to enforce the proper isolation of said patient.”  
(As amended by Commissioner's Orders of June 7, 1912.)

#### EXPOSURE TO INFECTION FORBIDDEN.

SEC. 3. No person shall knowingly expose himself or any other person, or if he has power and authority to prevent permit any other person to be exposed, to infection by scarlet fever, diphtheria, measles, whooping cough, chicken pox, epidemic cerebro-spinal meningitis, or typhoid fever, unless such exposure is necessary for the proper care and treatment of the patient.

#### NURSES. PRECAUTION TO BE TAKEN.

SEC. 4. No person who is nursing a patient suffering from scarlet fever, diphtheria, measles, or epidemic cerebro-spinal meningitis shall mingle with other persons who are not so engaged and who are not suffering from the disease from which the patient is suffering, until after said person has removed such outer garments as have been worn in the sick room and has properly disinfected the face and the hair if the hair has not been covered while in the sick room; nor in case of the diseases



named and of typhoid fever until such person has properly disinfected the hands.

# PERSONS ON INFECTED PREMISES, RESTRICTIONS UPON.

SEC. 5, No person residing in any dwelling-house or in any apartments where there is in said dwelling-house or apartments a patient suffering from diphtheria, scarlet fever, measles, or epidemic cerebro-spinal meningitis, shall, while so residing and during the continuance of such case, attend public or private school or Sunday school, or, if the patient was suffering from diphtheria or scarlet fever, engage in the manufacture, preparation, storage, or sale of food, or beverage.

SEC. 6. No person who has resided in any dwelling-house or in any apartments while there was in such dwelling-house or apartments a patient suffering from scarlet fever, diphtheria, measles, or epidemic cerebro-spinal meningitis shall after the removal, death, or recovery of the patient, or after the removal of such person from such dwelling-house or apartments, attend public or private school, or Sunday School, or, if the patient was suffering from scarlet fever or diphtheria, engage in the manufacture, preparation, or storage of food or a beverage for sale, or in the sale of food or a beverage, without the written permission of the health officer, for a period following the first proper isolation of the patient, when no disinfection is to be made, and when disinfection is necessary immediately following the completion of such disinfection, as may be directed by the health officer, and continuing if the patient was suffering from scarlet fever, diphtheria, or epidemic cerebro-spinal meningitis for seven days, or if the patient was suffering from measles for fourteen days.

## FUNERALS. WHO MAY ATTEND.

SEC. 7. When death has been due to diphtheria, scarlet fever, or epidemic cerebro-spinal meningitis, no person other than the adult members of the immediate family of the deceased, other adult immune persons not exceeding two, and other persons whose attendance is necessary, shall attend the funeral services or any other gathering about the remains of the deceased unless specially authorized in writing, by the health officer so to do. No person having power or authority to prevent, shall permit any person to attend any such funeral service or gathering when such attendance is unlawful.

## FUNERALS. NOT TO BE HELD IN CHURCH.

SEC. 8. No person shall carry the remains of any person who has died from diphtheria, scarlet fever, measles, or epidemic cerebro-spinal meningitis, into any church or other place of public assembly, nor, if he has the power and authority to prevent, permit it to be done.

## FUNERALS. CARE AND DISPOSAL OF BODY.

SEC. 9. Every person having power and authority so to do shall cause the dead body of any person who has died from diphtheria, scarlet fever, measles, or epidemic cerebro-spinal meningitis, as soon after death as practicable, to be placed in a proper casket, and shall cause such casket to be closed and to be kept closed thereafter; and every person aforesaid shall cause any such dead body to be disposed of by burial or cremation within the District of Columbia, or by transportation beyond the limits of the District of Columbia for burial or cremation, not later than the second day following the day of death.

## FUNERALS. TRANSPORTATION OF BODY BY RAIL OR BOAT.

SEC. 10. No person shall convey a body dead from diphtheria, scarlet fever, measles, epidemic cerebro-spinal meningitis, or typhoid fever, beyond the limits of the District of Columbia by means of any boat, car, or other public conveyance, unless said body has been embalmed arterially and by cavities, and is wrapped in a sheet saturated with a solution of formaldehyde gas of approximately forty per cent. strength, or with a five per cent. aqueous solution of carbolic acid, or a three per cent. aqueous mixture of compound cresol solution, or an aqueous solution of bichloride of mercury one part to five hundred; and the casket or case in which the body is placed must be metal lined and made airtight by means of solder or by means of proper rubber gaskets; the preparation of the body in accordance with these regulations to be evidenced by an affidavit of the undertaker who prepares the body for transportation, duly filed with the health officer. Bodies when so prepared may be conveyed outside of the District of Columbia but only subject to the laws of the jurisdiction wherein the body may be.

## CARRIAGES. DISINFECTION OF.

SEC. 11. No person having power and authority to prevent shall permit any car, carriage, or other vehicle, that has been used for the transportation of a patient suffering from diphtheria, scarlet fever, measles, chicken pox, or epidemic cerebro-spinal meningitis, to be used by any other person until after such car, carriage, or other vehicle, has been disinfected to the satisfaction of the health officer.

## WARNING SIGNS. POSTING OF.

SEC. 12. Whenever it comes to the knowledge of the health officer of the District of Columbia, either by a certificate sent to him in accordance with the provisions of An Act for the prevention of scarlet fever, diphtheria, measles, whooping cough, chicken pox, epidemic cerebrospinal meningitis, and typhoid fever in the District of Columbia, approved February 9, 1907, or in any other manner, that any person in said District is suffering from diphtheria or scarlet fever, said health officer shall cause one or more suitable warning signs to be placed in a conspicuous position or positions upon, at, or near the principal entrance or entrances to the building in which such person is, so that the same can be distinctly seen by persons about to enter such building: *Provided, however*, That if such building be a hospital, asylum, hotel, apartment house, or school, and in any case where two or more bedrooms and a bath room, including a water closet, are reserved for the exclusive use of the patient and of those in attendance upon him, said warning signs may, in the discretion of said health officer, be placed in a conspicuous position or positions within said building, at such place or places as said health officer may determine: *And provided further*, That in addition to or in lieu of the warning signs provided for above, said health officer may station a watchman or watchmen at such building for the purpose of procuring compliance with the provisions of law and of these regulations.

## WARNING SIGNS. INTERFERENCE WITH.

SEC. 13. No person shall, without the written consent of the health officer, handle, deface, oblit-

erate, remove, or conceal any warning sign displayed in accordance with these regulations.

#### WARNING SIGNS. REMOVAL TO BE REPORTED.

SEC. 14. The occupant of any building or of an apartment, and the superintendent, manager, janitor, or other person having immediate charge of any hospital, asylum, hotel, apartment house, or school, where a warning sign has been displayed in accordance with these regulations, which said warning sign has been to his knowledge, or when he might by due diligence have obtained knowledge thereof, defaced, obliterated, removed, or concealed, shall report in writing forthwith to the health officer the fact of such defacement, obliteration, removal, or concealment, except when in case of removal he has good reason to believe that it has been removed by authority of said health officer.

#### WARNING SIGNS. REMOVAL BY HEALTH OFFICER.

SEC. 15. No warning sign displayed in accordance with these regulations shall be removed until after the removal of the patient from the building, his recovery or death, and the subsequent disinfection of the building to the satisfaction of the health officer.

#### HEALTH OFFICER. DUTIES OF.

SEC. 16. The health officer shall make such investigations into the nature and origin of cases of diphtheria, scarlet fever, measles, whooping cough, chicken pox, epidemic cerebro-spinal meningitis, and typhoid fever, occurring in the District of Columbia, as in his judgment may be necessary

to prevent the spread of said diseases, and shall cooperate with persons having charge of patients suffering from such diseases as he deems needful for the prevention of the spread thereof. And in the discharge of each and every of the duties herein imposed the health officer may act not only in person but also through employees in the service of the health department duly designated by him for that purpose.

#### HEALTH OFFICER. INTERFERENCE WITH.

SEC. 17. No person shall interfere with the health officer, or with any officer, employee, or agent of the health department in the enforcement of these regulations.

#### SUSPECTED CASES. MANAGEMENT OF.

SEC. 18. Any person who is suffering from symptoms that so resemble those of diphtheria, scarlet fever, measles, whooping cough, chicken pox, epidemic cerebro spinal meningitis, or typhoid fever, that they cannot be distinguished therefrom with reasonable certainty shall be regarded for the purposes of these regulations as suffering from the diseases whose symptoms he presents: *Provided, however,* That no warning signs shall be displayed except in cases definitely diagnosed as diphtheria or scarlet fever.

#### DEFINITIONS.

SEC. 19. The word "building" as used in these regulations shall be held to include not only buildings as the word is ordinarily understood, but also boats, vessels, cars, vans, and all other places where a sick person may be. The term "apartment house" shall be held to mean a building in which two or more families are living



independently of one another, with separate water closets and bath rooms, and with separate kitchens, if any, for each family. These regulations shall be in full force and effect throughout the District of Columbia on and after the ninth day of April, 1907.

#### PENALTY CLAUSE.

SEC. 20. Any person who violates any of the provisions of these regulations shall be punished upon conviction thereof, by a fine not exceeding fifty dollars for the first offense, and for each subsequent offense by a fine not exceeding one hundred dollars.

H. B. F. MACFARLAND,  
H. L. WEST,  
JOHN BIDDLE,

*Commissioners of the District of Columbia.*

Officially published in the Washington Times, April 5, 1907, and the Washington Herald, April 6, 1907.

## MEMORANDUM RELATIVE TO HOSPITAL ACCOMMODATIONS.

### ASSIGNMENT OF CASES.

Separate buildings for the accommodation of persons suffering from minor contagious diseases are maintained at Garfield Memorial Hospital and Providence Hospital. These buildings are for the accommodation of persons who are able to pay for treatment as well as for those who are not. At present all cases of diphtheria treated at public expense are assigned by the health officer to Providence Hospital. All cases of scarlet fever requiring hospital treatment at public expense are assigned to Garfield Memorial Hospital. To the latter institution are assigned also all cases of mixed infection (scarlet fever and diphtheria), measles, and other minor contagious diseases requiring hospital treatment, such cases being cared for in a building separate and apart from the building in which cases of scarlet fever are under treatment; private cases of diphtheria, however, that go to Garfield Memorial Hospital by choice of the patient, are treated in the building with these cases.

### SUSPECT WARDS.

In connection with the buildings for the treatment of minor contagious diseases just mentioned, rooms thoroughly separated from the rest of the building are maintained for the accommodation of cases in which a minor contagious disease is suspected, but in which the nature of the disease cannot at once be diagnosed. Doubtful cases sent to these suspect wards are treated in said wards

long enough to permit a positive diagnosis to be made, when they can be either assigned to the proper ward for the treatment of minor contagious diseases, or, if the case be found not to be contagious in its nature, be assigned to the general hospital.

#### ADMISSION TO HOSPITALS.

**PAY CASES.**—Persons who are able to pay for treatment should, through their representatives, arrange directly with the hospital authorities as to accommodations and charges. When such arrangements have been made, the Health Department will, upon receipt of proper certificates from the attending physician, move the patient to the hospital in an ambulance provided for the transfer of such cases. In cases of this kind the Health Department does not undertake to verify the correctness of the physician's diagnosis, but leaves the responsibility for the diagnosis entirely to the patient and the attending physician. No charge is made for ambulance service.

**FREE CASES.**—Persons suffering from any of the minor contagious diseases, desiring hospital treatment at public expense, should apply through their proper representatives to the Health Department. Upon the receipt of such an application, in view of the fact that the patient is to go into a ward in which other persons are under treatment suffering from a contagious disease, the Health Department investigates to determine the nature of the disease by which the applicant is afflicted, and after satisfying itself upon that point transfers him to the proper hospital ward or to the suspect ward. Investigation is made also to determine the financial ability of those responsible for the care of the patient. In any case, however, in

which immediate transfer is necessary on account of the condition of the patient and the absence of facilities for proper treatment at his home, the transfer is effected immediately, the patient being placed in a suspect ward until the diagnosis can be definitely determined.

#### AMBULANCE SERVICE.

The Health Department maintains an ambulance service for the sole accommodation of persons suffering from minor contagious diseases. Requests for the transfer of patients suffering from these diseases should be made to the Health Department, if possible, between 10 o'clock a. m. and 7 o'clock p. m. Before the patient is transferred, however, it is necessary for the attending physician to furnish a certificate showing the nature of the disease from which the patient is suffering, so far as he may be able to determine it, and showing also that the transfer to the hospital can be made without jeopardizing the health or the life of the patient, or, if there be any doubt upon this point, that in the opinion of the attending physician the transfer of the patient will involve less jeopardy to his life and health than will result from allowing him to remain in the rooms in which he then is. These certificates may be filed at the Health Office or in case of emergency they may be executed by the physician and left with the person in charge of the premises where the patient is under treatment. In the latter case they will be collected by the ambulance driver before the removal of the patient.

WM. C. WOODWARD, M. D.,

*Health Officer.*

APRIL 9, 1907.

## MEMORANDUM RELATIVE TO DIPHTHERIA CULTURE AND WIDAL EXAMINATIONS.

---

The Health Department maintains a bacteriological laboratory where physicians practicing in the District of Columbia may have examined, free of charge, cultures from the mucous membrane of persons presenting symptoms of diphtheria or who have been exposed to diphtheria, and specimens of blood from persons presenting symptoms of typhoid fever, to aid in the prompt diagnosis of these diseases, and, in the case of diphtheria, in determining when infection is at an end.

Diphtheria culture tubes, and glass slides on which to submit specimens of blood for examination for the "Widal reaction," can be obtained at the Health Department, Permit Room, on the ground floor of the District Building, at any time between 9 o'clock a. m., and 11 o'clock p. m., or at any of the culture tube stations, which are located at drug stores in different parts of the city, during the business hours of such establishments. Such stations are designated by blue enamel signs, on which is printed in white letters, "Health Department, Culture Tube Station."

Specimens intended for bacteriological examination should be delivered at the Health Department, Permit Room. If delivered before 8 o'clock p. m., they will be examined before noon of the following day, and the physicians submitting them will be notified of the result of said examinations as soon as practicable.

